

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

PLAINTIFF <u>United States of America</u>		COURT CASE NUMBER <u>CV-10-2229</u>
DEFENDANT <u>Alfred Zotynia and Tina Zotynia</u>		TYPE OF PROCESS <u>Notice of U.S. Marshal's Sale</u>
<b>SERVE</b> ➔	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <u>Alfred Zotynia and Tina Zotynia</u>	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <u>Lake Road, Greeley, PA 18435</u>	
<b>AT</b>		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:		
<div style="display: flex; justify-content: space-between;"> <div> <u>JOSEPH MCCAFFERTY &amp; McKEEVER</u>  <u>Union Independence Center Suite 5000</u>  <u>701 Market Street</u>  <u>Philadelphia, PA 19106-1532</u> </div> <div> <div style="border: 1px solid black; padding: 5px; text-align: center;"> <b>FILED</b>  <b>SCRANTON</b>  <b>JAN 06 2005</b> </div> <div> Number of process to be served with this Form <u>285</u>  Number of <u>285</u> served in this case  Check for service on U.S.A. <input checked="" type="checkbox"/> </div> </div> </div>		

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

PLEASE POST HANDBILL

or or before 1-7-05

Signature of Attorney or other Originator requesting service on behalf of: <u>Joseph A. Woodcock Jr.</u>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER <u>215-627-1302</u>	DATE <u>11/30/04</u>
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**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. <u>67</u>	District to Serve No. <u>67</u>	Signature of Authorized USMS Deputy or Clerk <u>A. Lavelle</u>	Date <u>12/22/04</u>
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete <u>60</u> if different than shown above)	Date of Service <u>1/4/05</u> Time <u>10:30</u> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">am</span>
	Signature of U.S. Marshal or Deputy <u>R. I.</u>

Service Fee <u>\$270.00</u>	Total Mileage Charges (including endeavors) <u>\$81.00</u>	Forwarding Fee	Total Charges <u>\$351.00</u>	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS 12/29/04 - FAVORABLE - 1 DUSM - 140 MILES RT - NO SUCH ADDRESS - THERE IS A GREELEY LAKE RD. GREELEY, PA. - NEED A NUMERICAL ADDRESS. POST OFFICE HAS NO LISTING FOR SUBSECTION, THIS ROAD. SHE RESIDES AT 416-418 ROWLAND RD GREELEY, PA. - DUE TO ROAD CONSTRUCTION CANNOT GO TO THAT ADDRESS TO SPEAK WITH HER. NO PHONE # LISTED.

1/4/05 (1) DUSM (0900-1200) 85 miles total \$135.00 + 30.60 = \$165.60

PRIOR EDITIONS  
MAY BE USED**1. CLERK OF THE COURT**

FORM USM-285 (Rev. 12/15/00)

Total \$135.00 + \$135.00 + 30.60 + 50.40 = \$351.00